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CENTRAL INTELLIGENCE AGENCY

REPORT NO. [REDACTED]

INFORMATION REPORT

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~~CONFIDENTIAL~~

COUNTRY Ethiopia

DATE DISTR. 26 July 1949

SUBJECT Possibilities of B/W Research in Ethiopia

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SOURCE [REDACTED]

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1. [REDACTED] it is extremely unlikely that any direct B/W research is being undertaken in Ethiopia at the present time, either by the Ethiopian Government or other governments which maintain missions there.
2. The only foreign government which operates a medical or scientific mission in that country is the Soviet, which maintains the Dejazmatch Balcha Hospital in Addis Ababa. This hospital has been repeatedly reported to lack facilities or personnel for research in the diseases with B/W possibilities, and its position in the settled portion of the city would make such work extremely dangerous and highly improbable. Its personnel is known to have taken but a single trip into the country since the opening of the hospital in September 1947. Dr. Voronine collected and probably studied local primates there early in 1948, but an order that he left for the collection of a further 100 specimens has since been cancelled. There is no indication that the staff of the Dejazmatch Balcha Hospital is interested in detailed research on the nature of local diseases, immunology, or other things not connected with the routine operation of the hospital.
3. The Imperial Ethiopian Medical Research Institute, operated by the Ethiopian Ministry of Public Health under the Directorship of Professor Marion Giaquinto, is located directly within the city of Addis Ababa and is without means for the disposal of large quantities of dangerous wastes and residues, nor is it isolated or protected from trespass by unauthorized persons. Its staff consists of approximately four Italian doctors, not over 20 white technicians, and not more than 50 untrained Ethiopian personnel. The Ethiopian Government operates no research stations outside Addis Ababa and its hospitals in the country districts are completely unstaffed and unequipped for research of any but the most elemental kind.

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4. [REDACTED] Professor Giaquinto is a universally recognized specialist on malaria and onchocerciasis and is the only man conducting active research in Ethiopia at present. His first assistant, Dr. G. Rizzotti, is a specialist in internal parasites and stomach and intestinal disorders.

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These are the only two men in the country at present who have the capabilities, facilities, or inclination for research which might be of value in or applicable to B/W.

5. The following vaccines and serums are produced at the Imperial Ethiopian Medical Research Institute:

Smallpox. Present annual production about 1,000,000 doses. It would be possible to double production with present facilities.
Antityphus serum. Present annual production about 70,000 individual doses. It would be possible to double the present production.
Antirabic serum. Production in 1947 was 35,000 ampoules of 4 cc. each. There is a possibility of producing according to the local needs or for export if rabbits are made available.
Anticholera serum. 300,000 individual doses were produced in 1948, in order to accumulate an emergency stock.

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[redacted] these four, and possibly other serums and vaccines, could be produced in very large quantities if an interested government or organization were to furnish supplies and equipment. Present production is low because the Ethiopian Government lacks facilities for production and the organization for distribution and use among the people in the country.

6. In addition to the above-listed serums and vaccines, the Ethiopian Medical Research Institute produces an ointment from the seeds of Milletia ferruginea which is quite effective against scabies. Its preparation has not yet been published and there is no limit to the quantity which may be produced. It also produces an effective taeniafuge from the seeds of Embelia schimperi, and in 1948 prepared 100,000 doses of this.

7. Prof. Giaquinto and Dr. Rizzotti have published studies on brucellosis, onchocerciasis, and Rickettsia in Ethiopia which should appear in an English medical journal (Lancet?) during July or August of 1949. No other research in the nature or immunology of local diseases has been made in Ethiopia during recent years.

8. Psittacosis has never been found in the parrots native to Ethiopia, and tularonia is completely unknown. Typhoid has been known in but two cases in the past 15 years, both of foreigners; paratyphoid is unrecorded. Malaria of all four kinds is prevalent; onchocerciasis and kala azar are endemic and prevalent in the southwestern part of the country; syphilis, trachoma, and conjunctivitis are highly prevalent and widespread. Acute inflammatory enteritis, probably a result of Shiga infection, often becomes epidemic and has resulted in as many as 2,000 deaths in a single locality within a month. At the present time there is an epidemic disease, which closely resembles epidemic meningitis, in the Arbo region, 150 km. west of Addis Ababa.

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9. [redacted] Prof. Giaquinto believes the local onchocerciasis to be caused by a new species of parasite.

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